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OIPE		PART B	- FEE(S)	TRAN	NSMITTAL		
AUG 0 8 2005	) J		or <u>J</u>	<u>Fax</u>	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (703) 746-4000 ATION FEE (if requi	r Patents inia 22313-1450	5 should be completed where
maintenance fee notification	is.		ders and noti ) specifying a	a new co	or maintenance fees worrespondence address;	and/or (b) indicating a	5 should be completed where rrent correspondence address as separate "FEE ADDRESS" for
CURRENT CORRESPONDENCE 75 Mark Seeley			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission				
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Los, Angeles, CA 90025					T.J. DELCA	ĎΟ	(Depositor's name)
							(Signature)
						8 3/05	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR	ATTORNEY DOCKET N	NO. CONFIRMATION NO.
09/525,702	03/14/2000	Millind Mittal			7	042390.P7440	8578
TITLE OF INVENTION: M	ETHOD AND APPARATU	S FOR HARDWA	RE PLATFO	ORM IDE	ENTIFICATION WITH	I PRIVACY PROTECTI	ion
APPLN. TYPE	SMALL ENTITY	ISSUE FI	3 FEE		BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0		\$1400	08/03/2005
EXAMINER		ART UNIT		CL	ASS-SUBCLASS		
NALVEN, ANDREW L		2134	2134		713-168000	•	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  ROB D. ANDERSON				
	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion				•• /	ee is identified below, t	the document has been filed for
(A) NAME OF ASSIGN					Y and STATE OR COL		
		•					•

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
INTEL CORPORATION	SANTA CLARA, CALIFORNIA					
Please check the appropriate assignee category or categories (will not be	e printed on the patent):					
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):					
Kissue Fee	XIXIA check in the amount of the fee(s) is enclosed.					
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.					
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5. Change in Entity Status (from status indicated above)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
The Director of the USPTO is requested to apply the Issue Fee and Publ NOTE: The Issue Fee and Publication Fee (if required) will not be accepinterest as shown by the records of the United States Patent and Tradem	ication Fee (if any) or to re-apply any previously paid issue fee to the application identified above, pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.					
Authorized Signature Aland	Date 8/2/2005					
Typed or printed name EDWIN H. TAYLOR	Registration No. 25,129					
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